GSRPEG Rev. 08/12

AUTHORITY: Michigan State School

Aid Bill.

COMPLETION: Voluntary.

(Consideration for funding will not be possible if form is not filed.)

Michigan Department of Education
OFFICE OF GREAT START
EARLY CHILDHOOD EDUCATION
AND FAMILY SERVICES
P.O. Box 30008, Lansing, Michigan 48909

Direct questions regarding this form to (517) 241-3592

2012-2013 APPLICATION FOR: THE GREAT START READINESS PROGRAM EVALUATION GRANT

PART A. APPLICANT

| | Name of Organization | Federal ID Number | Phone # (Area Code) | |
|-----------|----------------------------------|-------------------|----------------------------|-------------------|
| APPLICANT | Address | County | City | Zip Code |
| CONTACT | Name of Contact Person | | Telephone # (Area Code) | Fax # (Area Code) |
| PERSON | E-Mail Address of Contact Person | | | |

| ASSURANCES AND CERTIFICATION: By signing this assurance certifies that it will agree to perform all actions and support all inter Certifications on pages 1a and will comply with all state and federal this program. The applicant certifies further that the information succorrect. | ntions stated in the Assurances and regulations and requirements pertaining to |
|---|--|
| AUTHORIZED SIGNATORY: | DATE: |
| TYPED NAME: | TELEPHONE: () |

PART A (Continued). ASSURANCES AND CERTIFICATIONS

--STATE PROGRAMS—

ASSURANCE CONCERNING MATERIALS DEVELOPED WITH FUNDS AWARDED UNDER THIS GRANT

The grantee assures that the following statement will be included on any publication or project materials developed with funds awarded under this program, including reports, films, brochures, and flyers: "These materials were developed under a grant awarded by the Michigan Department of Education."

CERTIFICATION REGARDING NONDISCRIMINATION UNDER FEDERALLY AND STATE ASSISTED PROGRAMS

The applicant hereby agrees that it will comply with all federal and Michigan laws and regulations prohibiting discriminatior and, in accordance therewith, no person, on the basis of race, color, religion, national origin or ancestry, age, sex, marital status or handicap, shall be discriminated against, excluded from participation in, denied the benefits of, or otherwise be subjected to discrimination in any program or activity for which it is responsible or for which it receives financial assistance from the U.S. Department of Education or the Michigan Department of Education.

CERTIFICATION REGARDING TITLE II OF THE AMERICANS WITH DISABILITIES ACT (ADA), P.L. 101-336, STATE AND LOCAL GOVERNMENT SERVICES

The Americans with Disabilities Act (ADA) provides comprehensive civil rights protections for individuals with disabilities. Title II of the ADA covers programs, activities, and services of public entities. Title II requires that, "No qualified individua with a disability shall, by reason of such disability be excluded from participation in or be denied the benefits of the services, programs, or activities of a public entity, or be subjected to discrimination by such entity." In accordance with Title II ADA provisions, the applicant has conducted a review of its employment and program/service delivery processes and has developed solutions to correcting barriers identified in the review.

<u>CERTIFICATION REGARDING TITLE III OF THE AMERICANS WITH DISABILITIES ACT (ADA), P.L. 101-336, PUBLIC ACCOMMODATIONS AND COMMERCIAL FACILITIES</u>

The Americans with Disabilities Act (ADA) provides comprehensive civil rights protections for individuals with disabilities. Title III of the ADA covers public accommodations (private entities that affect commerce, such as museums, libraries, private schools and day care centers) and only addresses existing facilities and readily achievable barrier removal. In accordance with Title III provisions, the applicant has taken the necessary action to ensure that individuals with a disability are provided full and equal access to the goods, services, facilities, privileges, advantages, or accommodations offered by the applicant. In addition, a Title III entity, upon receiving a grant from the Michigan Department of Education, is required to meet the higher standards (i.e., program accessibility standards) as set forth in Title III of the ADA for the program or service for which they receive a grant.

ASSURANCE REGARDING COMPLIANCE WITH GRANT PROGRAM REQUIREMENTS

Grantee agrees to comply with all applicable requirements of all state statutes, federal laws, executive orders, regulations, policies, and award conditions governing this program. Grantee understands and agrees that if it materially fails to comply with the terms and conditions of the grant award, the Michigan Department of Education may withhold funds otherwise due to the grantee from this grant program, any other federal grant programs or the State School Aid Act of 1979 as amended, until the grantee comes into compliance or the matter has been adjudicated and the amount disallowed has been recaptured (forfeited). The Department may withhold up to 100 percent of any payment based on a monitoring finding, audit finding or pending final report.

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PART B. PROJECT ABSTRACT

| NAME OF APPLICANT: | | |
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| PROJECT NAME: | | |
| Description of Project: | | |
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| Qualifications of Key Personnel: | | |
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| Applicant's Commitment and Canadity | | |
| Applicant's Commitment and Capacity: | | |
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PART C. NARRATIVE PROPOSAL

Use this page and up to 14 additional pages to completely describe all sections of the narrative proposal, as described in pages 9-14 of the instructions.

PART D. Great Start Readiness Program Evaluation Budget

INSTRUCTIONS: The Budget Summary (1) and the Budget Detail (2) must be prepared by or with the cooperation of the Business Office using the School District Accounting Manual (Bulletin 1022).

| 1 | RI | ID | C | \mathbf{FT} | SI | IN | M | ΛΔ | RY | 7 |
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| GET SUMMARY | | | | | | | | | |
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| | | | | | | | | | |
| RECIPIENT CODE GRANT NUMBER 135080 | | R PROJECT NUMBER | | PROJECT TYPE Regular | | ENDING DATE (mm/dd/yy) FY of 09/30/2013 | | f Approved Activity 2013 | |
| | | | | | | | | | |
| Instruction Basic Needs | | | | | | | | | |
| Instruction Added Needs | | | | | | | | | |
| Instruction Adult/0 | Continuing Education | | | | | | | | |
| Pupil Support Servic | es | | | | | | | | |
| Instructional Staff Se | ervices | | | | | | | | |
| General Administrati | on | | | | | | | | |
| School Administration | on | | | | | | | | |
| Business Services | | | | | | | | | |
| Operation and Maintenance | | | | | | | | | |
| 70 Pupil Transportation Services | | | | | | | | | |
| 0 Central Support Services | | | | | | | | | |
| Other Support Services | | | | | | | | | |
| Community Services | | | | | | | | | |
| SUBTOTALS (Sum of ALL lines above) | | | | | | | | | |
| Outgoing Transfers & Other Transactions | | | | | | | | | |
| INDIRECT CHARGES (Not Allowed) | | | | | | | | | |
| TOTAL EXPENDIT | URES | | | | | | | A) | |
| 2. BUDGET DETAIL Explain each line item, including cash and in-kind | | | | <u>FU</u> | INDING: Depar | tment of Education Sh | are of Expenditures | B) \$300,000.00 | |
| the indicated function code and title, on a plain sheet. | | | | Local Share of Expenditures (Block A Minus Block B) | | | | С) | |
| | | | | | | | | | |
| DATE BUSINES | | S OFFICE REPRESENTATIVE (Type or Print) | | | | SIGNATURE | | | |
| ATE | | | | | | SIGNATURE | | | |
| DATE | | CONTACT PERSO | N (Type or Print) | <u>/er</u> | | SIGNATI | JRE | | |
| | FUNCTION INSTRUCTION Added Instruction Added Instruction Added Instruction Adult/o Pupil Support Service Instructional Staff Se General Administration School Administration Business Services Operation and Maint Pupil Transportation Central Support Service Community Services SUBTOTALS (Sum of Outgoing Transfers of INDIRECT CHARG TOTAL EXPENDIT ET DETAIL In line item, including appears on the Budged function code and to | FUNCTION TITLE Instruction Basic Needs Instruction Added Needs Instruction Adult/Continuing Education Pupil Support Services Instructional Staff Services General Administration School Administration Business Services Operation and Maintenance Pupil Transportation Services Central Support Services Other Support Services Community Services SUBTOTALS (Sum of ALL lines above) Outgoing Transfers & Other Transactions INDIRECT CHARGES (Not Allowed) TOTAL EXPENDITURES ET DETAIL h line item, including cash and in-kind appears on the Budget Summary, using d function code and title, on a plain sheet. TE BUSINESS ATE PROJE | FUNCTION TITLE SALARIES (1000) | FUNCTION TITLE SALARIES (1000) BENEFITS (2000) | FUNCTION TITLE SALARIES (1000) Instruction | E OF APPLICANT IPIENT CODE GRANT NUMBER 135080 FUNCTION TITLE SALARIES (1000) Instruction — Basic Needs Instruction — Adult/Continuing Education Pupil Support Services Instruction — Adult/Continuing Education Pupil Support Services General Administration Business Services Operation and Maintenance Pupil Transportation Services Central Support Services Contral Support Services Contral Support Services SUBTOTALS (Sum of ALL lines above) Outgoing Transfers & Other Transactions INDIRECT CHARGES (Not Allowed) TOTAL EXPENDITURES ET DETAIL.— In the item, including cash and in-kind appears on the Budget Summary, using d function code and title, on a plain sheet. TE BUSINESS OFFICE REPRESENTATIVE (Type or Print) ATE PROJECT CONTACT PERSON (Type or Print) Lindy Buch or Richard Lower | E OF APPLICANT IPIENT CODE GRANT NUMBER 135080 PROJECT NUMBER Regular Regular Regular Carryover 09/30/2013 FUNCTION TITLE SALARIES (1000) Instruction — Basic Needs Instruction — Added Needs Instruction — Added Needs Instruction — Added Needs Instruction — Addid Needs Instruction — Addid Needs Instruction — Addid Needs Instruction — Addid Needs Instruction — Addinistration School Administration School Administration Business Services Operation and Maintenance Pupil Transportation Services Central Support Services Other Support Services TOTALE (Sum of ALL lines above) Outgoing Transfers & Other Transactions INDIRECT CHARGES (Not Allowed) TOTAL EXPENDITURES FUNDING: Department of Education Shapers on the Budget Summary, using d function code and title, on a plain sheet. TE BUSINESS OFFICE REPRESENTATIVE (Type or Print) SIGNAT Lindy Buch or Richard Lower | E OF APPLICANT IPIENT CODE GRANT NUMBER 135080 PROJECT NUMBER Regular | |